## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

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05/12/2004

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COZEN O'CONNOR, P.C. 1900 MARKET STREET PHILADELPHIA, PA 19103-3508 FIRST NAMED INVENTOR

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

VIA EXPRESS MAIL LABEL NO. FV147593454US

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature

(Date

APPLICATION NO.

FILING DATE

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/826,509

04/05/2001

Karin Lehmann-Bruinsma

AREN-0207

7872

TITLE OF INVENTION: NON-ENDOGENOUS, CONSTITUTIVELY ACTIVATED KNOWN G PROTEIN-COUPLED RECEPTORS

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	-	\$300	\$965	08/12/2004
EXAM	MINER	ART UNI	Т	CLASS-SUBCLASS		
Li, RU	IXIANG	1646		435-007100	*	
1. Change of correspondence	e address or indication of "F	ee Address" (37	2. For pri	nting on the patent front page,	list (1) the Michael	P Straher

CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Cozen O'Connor

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

## Arena Pharmaceuticals, Inc.

## San Diego, California

Please check the appropriate assignee category	or categories (will not be printed on the patent);	☐ individual XXcorporation or other private group entity ☐ government
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):	
XIssue Fee	☐ A check in the amor	ount of the fee(s) is enclosed.
X Publication Fee	☐ Payment by credit c	card. Form PTO-2038 is attached.
Advance Order - # of Copies1	The Director is her	reby euthorized by charge the required fee(s), or credit any overpayment, to

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) (Date) Aug. (0, 200 42982 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. Alexandria, Virginia 22313-1450. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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## **FEE TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

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( <b>2</b> )	109
(\$)	108

Complete if Known					
Application Number	09/826,509				
Filing Date	April 5, 2001				
First Named Inventor	Karin Lehmann-Bruinsma				
Examiner Name	R. Li				
Art Unit	1646				
Attorney Docket No.	AREN 17.US3.REG				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Charles Conditioned C Manage C Others C Manage	3. ADDITIONAL FEES					
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order		Entity	Small E	Intity		
☑ Deposit Account:						
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account 50-1275	1051	130	2051	65	Surcharge - late filing fee or oath	
Number	1052	50	2052	25	Surcharge - late provisional filing fee	
D					or cover sheet.	
Deposit Account Cozen O'Connor	1053	130	1053	130	Non-English specification	
Name	1812	2,520	1812	2,520	For filing a request for reexamination	
The Director is authorized to: (check all that apply)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(s) indicated below, except for the filing fee	1251	110	2251	55	Extension for reply within first month	
to the above-identified deposit account.  FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply within third month	
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply within fourth month	
Fee Fee Fee Fee Fee Description  Code (\$) Code (\$) Fee Paid	1255	2,010	2255	1,005	Extension for reply within fifth month	
1001 770 2001 385 Utility filing fee	1401	330	2401	165	Notice of Appeal	
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing	
1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1003 100 2003 00 Flovisional filling fee	1452	110	2452	55	Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 0	1453	1,330	2453	665	Petition to revive – unintentional	
	1501	1,330	2501	665	Utility issue fee (or reissue)	665
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	480	2502	240	Design issue fee	
Extra Fee from Fee Claims below Paid	1503	640	2503	320	Plant issue fee	
Total Claims	1460	130	1460	130	Petitions to the Commissioner	130
Independent Independent	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Claims	1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent  Large Entity   Small Entity	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Fee Fee Fee Fee Code (\$) Code (\$)	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18 2202 9 Claims in excess of 20	1810	770	2810	385	For each additional invention to be	
1201 86 2201 43 Independent claims in excess of 3					examined (37 CFR § 1.129(b))	1
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued Examination (RCE)	
1204 86 2204 43 ** Reissue independent claims over						
original patent	1802	900 l	1802	900	Request for expedited examination of a design application	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other fo	ee (sneci	fv) Public	ration Fe	ee; 1 soft copy of issued patent	303
SUBTOTAL (2) (\$) 0			.,			
		ced by Ba	asic Filin	g Fee Pa	aid SUBTOTAL (3) (\$) 10	98
**or number previously paid, if greater; For Reissues, see above						

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Michael A. Patane	Registration No. (Attorney/Agent)	42,982	Telephone	215-665-2000	
Signature	Michael F			Date	August 10, 2004	

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